

Monitored Claim Packet

The following instructions and documentation have been provided in your response to your recent inquiry. To avoid any unnecessary delays and ensure the timely processing of the loss draft, it is extremely important that you read and follow the instructions outlined below.

We are sure you are aware that New American Funding or the investor will be named as payee on your settlement checks, as we have a financial interest in your property. Any funds received for emergency advances or personal property will be endorsed and released to you without delay. If the total amount of the loss includes personal property, this amount will be deducted from the total loss amount to determine how the claim will be processed.

Please contact New American Funding immediately if the damage resulted in a total loss or near total loss of property as there may be additional considerations.

For losses of \$40,000 or less (if your loan is current or USDA loans have a \$20,000 limit), We will require the claim check and the adjuster's report from your insurance company. Upon receipt of these documents, the claim check will be endorsed and mailed back to you.

For losses greater than \$40,000 (and all loss amounts if your loan is delinquent), New American Funding will require your endorsement of the claim check and funds will be placed in a restricted escrow account so that repairs can be monitored. It is extremely important that New American Funding receive all items listed below in order to process the initial draw for your claim. New American Funding will do its part to ensure the claim process moves as quickly and smoothly as possible, however we will not be able to release any funds until the required documents are received and complete. Please include your loan number of all documents and allow 7-10 business days for the initial draw.

Required Documents:

- Claim check with back signed by all parties other than New American Funding.
- The complete/fully itemized adjuster's report issued by your insurance company.
- Signed and Accepted contractor's proposal
- New American Funding Loss Draft Form (please complete page 4 and return)
- Contractor's signed and completed W9 (if your loan is delinquent)
- Borrower Letter of Intent

Forward to our office at:

Overnight Mail:

New American Funding
ATTN: Loss Draft Department
c/o PLP
700 Tower Dr. Suite 400
Troy, MI 48098

Regular Mail:

New American Funding
ATTN: Loss Draft Department
c/o PLP
P.O. Box 7125
Troy, MI 48007-7125

After the initial draw, the following items will be required each time a draw is requested:

- Inspection verifying percentage of work complete
- Waiver of lien/sworn statement from the contractor.

If your loan is current all disbursed funds will be made payable to you. If a contractor completes any repairs, the waiver lien document will need to be completed by the contractor submitted to us.

If your loan is delinquent all disbursed funds will be made payable to yourself and your contractor, The waiver of lien document will need to be completed by the contractor and submitted.

If you have hired or plan to hire a Public Adjuster or retain any other third party to settle your loss claim, these fees are your sole responsibility. Fees will not be paid from insurance proceeds.

If you have any questions, please contact us at the toll- free number below:

New American Funding

Phone: +1 (888) 884-5314 M-F: 8:30 am – 7:00 pm EST

Fax: +1 (248) 781-9320

Email: NAFLD@ProctorLP.com

ACH Disbursement Program

We would like to invite you to participate in the ACH Disbursement Program.

To obtain the ACH Form, please visit <https://www.newamericanfunding.com/myloan/#forms>. Please complete that form and upload it to <https://www.newamericanfunding.com/myloan/#upload>.

Once you receive confirmation the ACH setup is complete, please inform the loss draft department to disburse all funds via ACH.

Loans must be current to be eligible for the ACH program.

Insurance & Claim Information:

MyInsurancePortal

<https://myinsuranceportal.com/>

Get alerts, upload and sign documents, oversee contractors, request inspections, and track your claim progress in one convenient place.

Watch Now: **Guide to Loss Drafts** — <https://www.newamericanfunding.com/myloan/escrow/damage-to-your-home/>

LOAN NUMBER _____

Third Party Authorization Form

We have received your homeowner's loss draft claim information. If you would like us to communicate with a Third Party concerning your loss draft claim, please complete the below information. Please provide this information as soon as possible to avoid any delays in processing your claim.

PROPERTY ADDRESS _____

CITY _____

STATE _____

POSTAL CODE _____

NAME OF THIRD PARTY _____

EMAIL ADDRESS _____

PHONE NUMBER _____

FAX NUMBER _____

THIRD PARTY ADDRESS _____

CITY _____

STATE _____

POSTAL CODE _____

PLEASE CHECK ALL THAT APPLY:

COMMUNICATE DIRECTLY WITH MY THIRD PARTY CONCERNING MY LOSS.

SEND DISBURSEMENTS TO MY THIRD PARTY DIRECTLY

Authorization

I/we hereby authorize the Third Party listed above to obtain information concerning my loss draft file process including all directives indicated above. My signature approves the authorization of the Third Party. This authorization expires one year from the date signed unless cancelled earlier or when the loss draft claim closes.

BORROWER SIGNATURE _____

DATE _____

CO-BORROWER SIGNATURE _____

DATE _____

Please include your loan number on all documents and check(s). Forward to our office at:

Overnight Mail:

New American Funding
ATTN: Loss Draft Department
c/o PLP
700 Tower Dr. Suite 400
Troy, MI 48098

Regular Mail:

New American Funding
ATTN: Loss Draft Department
c/o PLP
P.O. Box 7125
Troy, MI 48007-7125

LOAN NUMBER _____

Loss Draft Claim Form

This form must be completed and returned with all items listed on the procedure letter. The information you provide below will help us to better serve you during your loss.

PROPERTY ADDRESS _____

CITY _____

STATE _____

POSTAL CODE _____

PHONE NUMBER _____

EMAIL _____

PHONE

EMAIL

MAIL

MORNING

AFTERNOON

EVENING

PREFERRED METHOD OF CONTACT _____

PREFERRED CONTACT TIME _____

INSURANCE ADJUSTER'S NAME _____

INSURANCE ADJUSTER'S PHONE NUMBER _____

PLEASE LIST ALL PERSONS AUTHORIZED TO SPEAK ON THE CLAIM, NOT PREVIOUSLY LISTED _____

SIGNATURE _____

DATE _____

SIGNATURE _____

DATE _____

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Troy, MI 48007-7125

LOAN NUMBER _____

Waiver of Lien

This form must be completed and returned with all items listed on the procedure letter. The information you provide below will help us to better serve you during your loss.

PROPERTY ADDRESS _____ CITY _____ STATE _____ POSTAL CODE _____

My/our contract with _____
HOMEOWNER / BORROWER NAME

to provide: _____
DESCRIPTION OF SERVICES PROVIDED

Select One:

FULL CONDITIONAL

Having been fully paid and satisfied, all my/our construction lien rights against such property are hereby waived and released.

This waiver is conditioned on actual payment of _____.

FULL UNCONDITIONAL

Having been fully paid and satisfied, all my/our construction lien rights against such property are hereby waived and released.

DATE _____ COMPANY _____

ADDRESS _____

SIGNATURE _____ CITY _____ STATE _____ POSTAL CODE _____

Sworn Statement

All workers and all merchandise obtained by us/me will be the responsibility of the undersigned.

SIGNATURE _____ DATE _____

Please include your loan number on all documents and check(s). Forward to our office at:

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Troy, MI 48098

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c/o PLP
P.O. Box 7125
Troy, MI 48007-7125

BORROWER NAME

LOAN NUMBER

DATE

PROPERTY ADDRESS

Dear Borrower,

We have received notice of an insurance claim related to damage at the above-referenced property. In accordance with investor and insurer guidelines, it is required that you, as the borrower, confirm your intent to apply the insurance claim funds towards the necessary repair or restoration of the damaged property.

Please review and complete the following attestation:

Borrower Attestation:

I/We acknowledge receipt of insurance claim funds in connection with damage to the above property. I/We hereby confirm that:

- I/We intend to use all applicable insurance proceeds solely for the purpose of repairing or restoring the damaged property to its pre-loss condition or better.
- I/We understand that failure to apply these funds toward property repairs may constitute a violation of the mortgage agreement and may result in additional servicing actions.
- I/We understand that providing false information or misrepresenting the intended use of insurance proceeds may result in legal or financial consequences.
- I/We agree to provide additional documentation if requested, including invoices, contractor estimates, or photos evidencing completed repairs.

I/We have enclosed the insurance claim check(s) and the adjuster's report with this attestation.

I/We understand that this attestation is required for the loss draft process to continue.

BORROWER SIGNATURE

DATE

CO-BORROWER SIGNATURE

DATE

Please return this completed form with your insurance check(s) and adjuster's report. If you have questions, contact our Loss Drafts Department by calling +1 (888) 884-5314 or by emailing NAFLD@proctorlp.com.

Sincerely,

New American Funding
Loss Drafts Department